

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO. | DATE     |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION         |          |        |          |
| O.I.P.E. CLASSIFIER       |          | 20     | 1/17     |
| FORMALITY REVIEW          | S/K      | 809    | 1/25/01  |
| RESPONSE FORMALITY REVIEW | R.B      | 1076   | 05/22/01 |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

| Claim | Final | Original | Date |
|-------|-------|----------|------|
| 1     | ✓     | 1/2      | 9    |
| 2     | ✓     | 2/1      | 17   |
| 3     | ✓     | 3/1      | 2    |
| 4     | ✓     | 4/1      | 8    |
| 5     | ✓     | 5/1      | 03   |
| 6     | ✓     | 6/1      |      |
| 7     | ✓     | 7/1      |      |
| 8     | ✓     | 8/1      |      |
| 9     | ✓     | 9/1      |      |
| 10    | ✓     | 10/1     |      |
| 11    | ✓     | 11/1     |      |
| 12    | ✓     | 12/1     |      |
| 13    | ✓     | 13/1     |      |
| 14    | ✓     | 14/1     |      |
| 15    | ✓     | 15/1     |      |
| 16    | ✓     | 16/1     |      |
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REST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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